FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

FORM D

Washington, D.C. 20549

OMB APPROVAL				
OMB Number:	3235-0076			
Expires:	April 30, 2008			
Estimated ave	rage burden			
hours per respon	nse16.00			

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, **SECTION 4(6), AND/OR** UNIFORM LIMITED OFFERING EXEMPTION

SEC USE ONLY						
Prefix		Serial				
DATE RECEIVED						

Name of Offering(check if this is an amendment and name has changed, and indicate change.) Series A Preferred Stock	SEG Mail Processing
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6)	ULOE Section
Type of Filing: New Filing Amendment	MAY 0 1 2008
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	Washington, DC
Name of Issuer (check if this is an amendment and name has changed, and indicate change.) StreamWorks, Inc.	101
Address of Executive Offices (Number and Street, City, State, Zip Code) 3233 Lance Drive, Stockton, CA 95205	Telephone Number (Including Area Code) 209-337-3307
Address of Principal Business Operations (if different from Executive Offices) (Number and SPROCESSED)	Telephone Number (Including Area Code)
Brief Description of Business Design and manufacture fishing equipment and clothing. MAY 0 6 2008 E THOMSON REUTERS	
Type of Business Organization corporation	ease speci! 08045813
Actual or Estimated Date of Incorporation or Organization: Month Year O 2	DE

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

- ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

1 of 10

A. BASIC IDENTIFICA	TION DATA						
2. Enter the information requested for the following:							
 Each promoter of the issuer, if the issuer has been organized within the past five years; 							
 Each beneficial owner having the power to vote or dispose, or direct the vote 							
 Each executive officer and director of corporate issuers and of corporate 	general and managing partners of partnersh	nip issuers; and					
 Each general and managing partner of partnership issuers. 							
Check Box(es) that Apply: Promoter Beneficial Owner Exe		eneral and/or Managing Partner					
Full Name (Last name first, if individual)							
Duffy Revocable Trust							
Business or Residence Address (Number and Street, City, State, Zip Code)							
421 Juanita Way, Los Altos, CA 94022							
Check Box(es) that Apply: Promoter Beneficial Owner Ex		General and/or Managing Partner					
Full Name (Last name first, if individual) Brauner, William							
Business or Residence Address (Number and Street, City, State, Zip Code) c/o StreamWorks, Inc., 3233 Lance Drive, Stockton, CA 95205							
Check Box(es) that Apply: Promoter Beneficial Owner Ex		General and/or Managing Partner					
Full Name (Last name first, if individual) Duffy, James							
Business or Residence Address (Number and Street, City, State, Zip Code) c/o StreamWorks, Inc., 3233 Lance Drive, Stockton, CA 95205							
Check Box(es) that Apply: Promoter Beneficial Owner Ex		General and/or Managing Partner					
Full Name (Last name first, if individual)							
Business or Residence Address (Number and Street, City, State, Zip Code)							
Check Box(es) that Apply: Promoter Beneficial Owner Ex		General and/or Managing Partner					
Full Name (Last name first, if individual)		1,					
Business or Residence Address (Number and Street, City, State, Zip Code)							
Check Box(es) that Apply: Promoter Beneficial Owner Ex		General and/or Managing Partner					
Full Name (Last name first, if individual)							
Business or Residence Address (Number and Street, City, State, Zip Code)							
Check Box(es) that Apply: Promoter Beneficial Owner Ex		General and/or Managing Partner					
Full Name (Last name first, if individual)							
Business or Residence Address (Number and Street, City, State, Zip Code)							

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 Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five y Each beneficial owner having the power to vote or dispose, or direct the vote or dispose Each executive officer and director of corporate issuers and of corporate general ar Each general and managing partner of partnership issuers. 	sition of, 10% or more of a class of equity securities of the issuer.
Check Box(es) that Apply: Promoter Beneficial Owner Executive Of	fficer Director General and/or Managing Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: Promoter Beneficial Owner Executive O	officer Director General and/or Managing Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: Promoter Beneficial Owner Executive O	Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: Promoter Beneficial Owner Executive C	Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: Promoter Beneficial Owner Executive C	Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: Promoter Beneficial Owner Executive C	Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: Promoter Beneficial Owner Executive C	Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	

American LegalNet, inc. www.USCourtForms.com

	, j.			a rivi	B. IN	FORMATI	ON ABOU	T OFFERI	NG			<u> </u>	111
		-			, 201 211							Yes	No
1.	Has the	issuer sold,	or does the	issuer inter	d to sell, to	non-accrec	lited investo	ors in this of	fering?				\boxtimes
						ndix, Colun							
2.	What is	the minimu	ım investme	nt that will	be accepted	d from any i	individual?					\$ n/a Yes	No
												П	\boxtimes
3. 4.	Does the	e offering p	ermit joint o	ownership o ed for each	of a single u person wh	nit? o has been	or will be	paid or giv	en, directly	y or indirec	tly, any		_
7.	commis	sion or sim	ilar remuner	ation for so	dicitation o	f purchasers	s in connect	ion with sai	es of secur	ities in the c	ittering.		
	or states	s, list the na	ted is an ass ame of the b	roker or dea	aler. If mor	e than five	(5) persons	to be listed	are associa	ted persons	of such		
	a broke	r or dealer,	you may set	forth the in	formation 1	for that brol	cer or dealer	only.					
Ful N/A		Last name f	irst, if indivi	idual)									
		Residence A	Address (Nu	mber and S	treet, City,	State, Zip C	Code)				_ · ·		
Na	me of Ass	sociated Bro	oker or Deal	er	·-					······			
	_												
Sta			Listed Has				nasers						All States
	(Che	ck "All Stat	tes" or check	individual	States)								_
	AL	AK	AZ	AR	CA	CO	СТ	DE	DC	FL	GA	н	ID
	IL	IN	ĪA	KS	KY	LA	ме	MD	MA	М	MN	MS	МО
	MT	NE	NV	ИН	ИJ	NM	NY	NC	ND	OH	ОК	OR	PA
	RI	sc	SD	TN	TX	U	VT	VA	WA	wy	wı	WY	PR
Fu	ll Name (Last name i	first, if indiv	idual)									
N/		Dacidence	Address (Nu	mber and S	Street City	State Zin (Code)						
					——————————————————————————————————————								
Na	me of As	sociated Br	oker or Dea	ler									
Sta	ates in W	hich Person	Listed Has	Solicited or	Intends to	Solicit Purc	hasers				-		
	(Che	eck "All Sta	tes" or checl	k individual	States)	,						🔲 4	All States
	AL	AK	AZ	AR	CA	Cd	СТ	DE	DC	FL	GA	HI	ID
	IL	IN	ĪA	KS	KY	[IA	ME	MD	MA	M	MN	MS	МС
	мт	NE	NV	NH	NJ	NM	NY	NC	ND	OH	ок	OR	PA
	RI	sd	SD	TN	ТХ	[UI	VT	VA	WA	wy	wı	wy	PR
	[KI]	134	घण	IIN	[14	<u> </u>	**	(***)		بت	لتنبا	التبيتا	
Fu N		(Last name	first, if indiv	vidual)									
		Residence	Address (N	umber and S	Street, City,	State, Zip	Code)						
N:	ame of As	ssociated B	roker or Dea	ler			<u> </u>						
						G. I. A. D.	1						
St			Listed Has			Sonch Purc	masers					🗀 4	All States
	AL	AK	AZ	AR	CA	co	СТ	DE	DC	FL	GA	ні	ID
	[IL]	IN	IA	KS	KY	LA	ме	MD	МА	МІ	MN	MS	МС
	мт	NE	NV.	NH	נא	NM	NY	NC	של	ОН	ок	OR	PA
	RI]	SC	SD	TN	TX	UT	VT	VA	WA	w	wı	wy	PR
	[KI]	rsr.	ותפ	114	[보스]	01	لششا	431	لكنن	لنب			

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box [] and indicate in the columns below the amounts of the securities offered for exchange and			
	already exchanged.	Aggregate		Amount Already
	Type of Security	Offering Price		Sold
	Debt\$	0.00	\$	0.00
	Equity	<u> </u>	\$	
	Equity			
	Convertible Securities (including warrants)\$	740,000.00	\$	740,000.00
	Partnership Interests	0.00	\$	0.00
	Other (Specify)\$	0.00	\$	0.00
	Total\$	740,000.00	\$	740,000.00
	Answer also in Appendix, Column 3, if filing under ULOE.			
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."			Aggregate
		Number Investors		Dollar Amount of Purchases
	Accredited Investors	4		740,000.00
	Non-accredited Investors		. :	§
	Total (for filings under Rule 504 only)			\$
	Answer also in Appendix, Column 4, if filing under ULOE.			
3.	The state of the s			
	Type of Offering	Type of Security		Dollar Amount Sold
	Rule 505			\$
	Regulation A			\$
	Rule 504			\$
	Total			\$0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.			
	Transfer Agent's Fees]	S
	Printing and Engraving Costs] :	S
	Legal Fees] :	10,000.00
	Accounting Fees] :	S
	Engineering Fees] :	S
	Sales Commissions (specify finders' fees separately)] :	\$
	Other Expenses (identify)] :	s
	Total] :	10,000.00

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			n GSAQ TOTALDIQUE	And the second s
	b. Enter the difference between the aggregate offering and total expenses furnished in response to Part C — Q proceeds to the issuer."	uestion 4.a. This difference is the "adjusted gross		s 730,000.00
5.	Indicate below the amount of the adjusted gross proceeds of the purposes shown. If the amount for any purposes to the left of the estimate. The total of the proceeds to the issuer set forth in response to Part C	ed to the issuer used or proposed to be used for ourpose is not known, furnish an estimate and he payments listed must equal the adjusted gross		
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees] s	s
	Purchase of real estate			□\$
	· Purchage cental or lessing and installation of machi-	nerv		
	and equipment] s	. 🗆 s
	Construction or leasing of plant buildings and facility	ties] \$	_ 🗆 s
	Acquisition of other businesses (including the value offering that may be used in exchange for the assets issuer pursuant to a merger)	or securities of another	□ s	_ 🗆 s
	Repayment of indebtedness		_] s	_
	Working capital			⊠ s 730,000.00
	Other (specify):	[] \$	_ 🗀 s
		[s
	Column Totals			∑ \$ <u>730,000.00</u>
	Total Payments Listed (column totals added)		□s	730,000
oi.	e issuer has duly caused this notice to be signed by the mature constitutes an undertaking by the issuer to furni information furnished by the issuer to any non-accret	undersigned duly authorized person. If this notice ish to the U.S. Securities and Exchange Commis.	is filed under lasion, upon writ	Rule 505, the following
Īs	suer (Print or Type)	Signature	Date	
	* **	Danie P. Jung	4-30-07	8
_	·	Title of Signer (Print or Type)	<u></u>	
Ja	mes Duffy	Chairman of the Board		

END

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)